

# McCain Amendment Program Application Form

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## I. Applicant Biographic Information

Name of Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Place of Birth \_\_\_\_\_  
Present Nationality \_\_\_\_\_  
Marital Status \_\_\_\_\_

(If married, please submit copy of marriage certificate. If you have any children, attach copy of birth certificate.)

## II. Information Concerning Refugee Parent

Name of Parent \_\_\_\_\_  
Parent's file number  
(e.g. IV ##### / R##-####) \_\_\_\_\_  
Address \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Place of Birth \_\_\_\_\_  
Date of Interview with ODP \_\_\_\_\_  
Date of Approval as Refugee/  
Immediate Relative immigrant \_\_\_\_\_  
Date of Entry into the U.S., if known \_\_\_\_\_  
Present place of residence \_\_\_\_\_

## III. Information Concerning Original Denial of Applicant

Age of applicant at time of parent's approval as a refugee:

Was applicant invited to attend interview at ODP? If not, why?

Did applicant attend interview at ODP? If yes, when?

Was applicant denied at interview?

Reason for denial (over 21, marital status, relationship to principal applicant not established, other):

Comments:

Please attach your original letter of ineligibility for refugee status (if applicable), and submit along with this application to the following address:

**Refugee Resettlement Section (RRS)**  
**U.S. Consulate General**  
**4 Le Duan, District 1**  
**Ho Chi Minh City, Viet Nam**  
**Tel: (84-8) 829-2750**  
**Fax: (84-8) 822-7297**

After review of this application, the RRS will inform applicants directly as to whether or not they are eligible for a refugee interview under the McCain Amendment Program. Please direct any and all inquiries regarding the status of your case to the RRS unit.